



PATENT  
IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant: McKay, John

Examiner: To Be Assigned

Appl. No.: 10/569,474

Art Unit: To Be Assigned

Filed: February 24, 2006

Conf. No: 8576

Title: PACKAGING MACHINE AND METHOD FOR PAPERBOARD CARTONS

Attorney Docket No.: 6.30.3260 PCT/CA-US

**PETITION FOR REVIVAL OF AN APPLICATION FOR PATENT ABANDONED**  
**UNINTENTIONALLY UNDER 37 CFR 1.137(b)**

Commissioner for Patents  
**Mail Stop PCT**  
PCT Legal Office  
Randolph Building  
401 Dulany Street  
Alexandria, VA 22314

Sir:

The above-identified application became abandoned for failure to file a timely and proper reply to the Notification of Missing Requirements under 35 U.S.C. 37 in the United States Designated/Elected Office. The date of abandonment is the day after the expiration date of the period set for reply in the office notice or action plus any extension of time actually obtained. It is our understanding that the application is now abandoned.

The Applicant hereby petitions for the revival of this application.

Enclosed herewith are the following documents:

1. Petition Fee (37 CFR 1.27) and Credit Card Payment Form (PTO-2038); and
2. Response to the Notice of Missing Parts.

08/27/2007 GFREY1 0000015 10569474

1500.00 0P

02 FC:1453

Petition for Revival of an Application for Patent  
Application No. 10/569,474 – McKAY, John  
Our Ref: 6.30.3260 PCT/CA-US

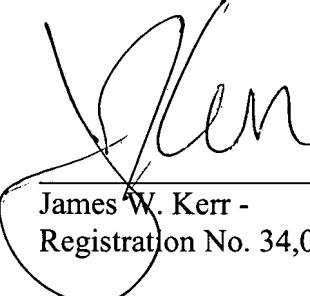
Page 2.

Since this utility application was filed on or after June 8, 1995, no terminal disclaimer is required.

The entire delay in filing the required reply from the due date for the required reply until the filing of a grantable petition under 37 CFR 1.137(b) was unintentional.

Revival of the above-noted application is respectfully requested.

August 22, 2007



\_\_\_\_\_  
James W. Kerr -  
Registration No. 34,082

Labatt Brewing Company Limited  
303 Richmond Street  
London, ON N6B 2H8  
Canada

PH: (519) 667-7525  
FAX: (519) 667-7577

Under the Paperwork Reduction Act of 1995 no persons are required to respond to a collection of information unless it displays a valid OMB control number

AUG 23 2007  
FEE TRANSMITTAL  
For FY 2007

Effective on 12/08/2004.  
Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).

 Applicant claims small entity status. See 37 CFR 1.27**TOTAL AMOUNT OF PAYMENT** (\$)  
**1,500.00****Complete if Known**

Application Number	10/569,474
Filing Date	February 24, 2006
First Named Inventor	McKAY, John
Examiner Name	N/A
Art Unit	N/A
Attorney Docket No.	6.30.3260PCT/CA-US

**METHOD OF PAYMENT** (check all that apply)

Check  Credit Card  Money Order  None  Other (please identify): \_\_\_\_\_  
 Deposit Account Deposit Account Number: \_\_\_\_\_ Deposit Account Name: \_\_\_\_\_

For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)

Charge fee(s) indicated below  Charge fee(s) indicated below, except for the filing fee  
 Charge any additional fee(s) or underpayments of fee(s) under 37 CFR 1.16 and 1.17  Credit any overpayments

WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.

**FEE CALCULATION****1. BASIC FILING, SEARCH, AND EXAMINATION FEES**

<b>Application Type</b>	<b>FILING FEES</b>		<b>SEARCH FEES</b>		<b>EXAMINATION FEES</b>		<b>Fees Paid (\$)</b>
	<b>Fee (\$)</b>	<b>Small Entity Fee (\$)</b>	<b>Fee (\$)</b>	<b>Small Entity Fee (\$)</b>	<b>Fee (\$)</b>	<b>Small Entity Fee (\$)</b>	
Utility	300	150	500	250	200	100	_____
Design	200	100	100	50	130	65	_____
Plant	200	100	300	150	160	80	_____
Reissue	300	150	500	250	600	300	_____
Provisional	200	100	0	0	0	0	_____

**2. EXCESS CLAIM FEES**Fee Description

	<b>Small Entity</b>
Each claim over 20 (including Reissues)	50 25
Each independent claim over 3 (including Reissues)	200 100
Multiple dependent claims	360 180

<b>Total Claims</b>	<b>Extra Claims</b>	<b>Fee (\$)</b>	<b>Fee Paid (\$)</b>	<b>Multiple Dependent Claims</b>
- 20 or HP =	x	=		<b>Fee (\$)</b> <b>Fee (\$)</b>

HP = highest number of total claims paid for, if greater than 20.

<b>Indep. Claims</b>	<b>Extra Claims</b>	<b>Fee (\$)</b>	<b>Fee Paid (\$)</b>	<b>Fee (\$)</b>	<b>Fee Paid (\$)</b>
- 3 or HP =	x	=			

HP = highest number of independent claims paid for, if greater than 3.

**3. APPLICATION SIZE FEE**

If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).

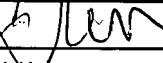
<b>Total Sheets</b>	<b>Extra Sheets</b>	<b>Number of each additional 50 or fraction thereof</b>	<b>Fee (\$)</b>	<b>Fee Paid (\$)</b>
- 100 =	/ 50 =	(round up to a whole number) x	=	

**4. OTHER FEE(S)**

Non-English Specification, \$130 fee (no small entity discount)

Other (e.g., late filing surcharge): Petition for Revival Fee \_\_\_\_\_ 1,500.00

**SUBMITTED BY**

Signature		Registration No. (Attorney/Agent) 34,082	Telephone 519-667-7525
Name (Print/Type)	James W. Kerr		Date August 22, 2007

This collection of information is required by 37 CFR 1.136. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 30 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

If you need assistance in completing the form, call 1-800-PTO-9199 and select option 2.